

TRANSMITTAL LETTER TO THE UNITED STATES RECEIVING OFFICE

PTO-1382 (Rev. 4-1995) (Modified)

PCTUS2.FRP/REV03

Date	March 14, 2003
International Application No.	NEW
Attorney Docket No.	P-0205-PCT

I. Certification under 37 CFR 1.10 (if applicable)

EV212805315US
Express Mail mailing number

March 14, 2003
Date of Deposit

I hereby certify that the application/correspondence attached hereto is being deposited with the United States Postal Service "Express Mail Post Office to Addressee" service under 37 CFR 1.10 on the date indicated above and is addressed to Assistant Commissioner for Patents, Washington, D.C. 20231.

Signature of person mailing correspondence

Christy Hennigan
Typed or printed name of person mailing correspondence

II. ☒ New International Application

TITLE	CONDUCTIVE POLYMER DEVICE AND METHOD OF MANUFACTURING SAME
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Earliest priority date (Day/Month/Year)
11-12-2002

SCREENING DISCLOSURE INFORMATION: In order to assist in screening the accompanying international application for purposes of determining whether a license for foreign transmittal should and could be granted and for other purposes, the following information is supplied. (Note: check as many boxes as apply):

- A. ☐ The invention disclosed was not made in the United States.
- B. ☐ There is no prior U.S. application relating to this invention.
- C. ☒ The following prior U.S. application(s) contain subject matter which is related to the invention disclosed in the attached international application. (NOTE: priority to these applications may or may not be claimed on form PCT/RO/101 (Request) and this listing does not constitute a claim for priority).

application no.	60/432,493	filed on	December 11, 2002
application no.		filed on	

- D. ☐ The present international application ☐ is identical ☐ contains less subject matter than that found in the prior U.S. application(s) identified in paragraph C.
- E. ☒ The present international application ☒ contains additional subject matter not found in the prior U.S. application(s) identified in paragraph C. above. The additional subject matter is found on pages 3-21 and ☒ DOES NOT ALTER ☐ MIGHT BE CONSIDERED TO ALTER the general nature of the invention in a manner which would require the U.S. application to have been made available for inspection by the appropriate defense agencies under 35 U.S.C. 181 and 37 CFR 5.1. See 37 CFR 5.15

III. ☐ A Response to an Invitation from the RO/US. The following document(s) is (are) enclosed:

- A. ☐ A Request for An Extension of Time to File a Response
- B. ☐ A Power of Attorney (General or Regular)
- C. ☐ Replacement pages:

pages		of the request (PCT/RO/101)	pages		of the figures
pages		of the description	pages		of the abstract
pages		of the claims			

- D. ☐ Submission of Priority Documents

Priority document		Priority document	
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- E. ☐ Fees as specified on attached Fee Calculation sheet form PCT/RO/101 annex

IV. ☐ A Request for Rectification under PCT 91 ☐ A Petition ☐ A Sequence Listing Diskette

V. ☒ Other (please specify): Copy of General Power of Attorney

The person signing this form is the:

<input type="checkbox"/> Applicant
<input checked="" type="checkbox"/> Attorney/Agent (Reg. No.) 28,727
<input type="checkbox"/> Common Representative

Howard J. Klein
Typed name of signer
Signature



REQUEST

The undersigned requests that the present international application be processed according to the Patent Cooperation Treaty.

For receiving Office use only

International Application No.

International Filing Date

Name of receiving Office and "PCT International Application"

Applicant's or agent's file reference
(if desired) (12 characters maximum) P-0205-PCT

Box No. I TITLE OF INVENTION
CONDUCTIVE POLYMER DEVICE AND METHOD OF MANUFACTURING SAME

Box No. II APPLICANT

☐ This person is also inventor

Name and address: (Family name followed by given name; for a legal entity, full official designation. The address must include postal code and name of country. The country of the address indicated in this Box is the applicant's State (that is, country) of residence if no State of residence is indicated below.)
BOURNS, INC
1200 Columbia Ave.
Riverside, CA 92507
USA

Telephone No.
(909) 781-5408

Facsimile No.
(909) 781-5038

Teleprinter No.

Applicant's registration No. with the Office

State (that is, country) of nationality:
US

State (that is, country) of residence:
US

This person is applicant for the purposes of: ☐ all designated States ☒ all designated States except the United States of America ☐ the United States of America only ☐ the States indicated in the Supplemental Box

Box No. III FURTHER APPLICANT(S) AND/OR (FURTHER) INVENTOR(S)

Name and address: (Family name followed by given name; for a legal entity, full official designation. The address must include postal code and name of country. The country of the address indicated in this Box is the applicant's State (that is, country) of residence if no State of residence is indicated below.)

BURKE, Ray
Tullig
Whitechurch
Co. Cork
IRELAND

This person is:

☐ applicant only

☒ applicant and inventor

☐ inventor only (If this check-box is marked, do not fill in below.)

Applicant's registration No. with the Office

State (that is, country) of nationality:
IRELAND

State (that is, country) of residence:
IRELAND

This person is applicant for the purposes of: ☐ all designated States ☐ all designated States except the United States of America ☒ the United States of America only ☐ the States indicated in the Supplemental Box

☒ Further applicants and/or (further) inventors are indicated on a continuation sheet.

Box No. IV AGENT OR COMMON REPRESENTATIVE; OR ADDRESS FOR CORRESPONDENCE

The person identified below is hereby/has been appointed to act on behalf of the applicant(s) before the competent International Authorities as:

☒ agent ☐ common representative

Name and address: (Family name followed by given name; for a legal entity, full official designation. The address must include postal code and name of country.)

Howard J. Klein
KLEIN, O'NEILL & SINGH, LLP
2 Park Plaza Suite 510
Irvine, CA 92614

Telephone No.
(949) 955-1920

Facsimile No.
(949) 955-1921

Teleprinter No.

Agent's registration No. with the Office
28,727

☐ Address for correspondence: Mark this check-box where no agent or common representative is/has been appointed and the space above is used instead to indicate a special address to which correspondence should be sent.

Continuation of Box No. III FURTHER APPLICANTS AND/OR (FURTHER) INVENTOR(S)	
<i>If none of the following sub-boxes is used, this sheet should not be included in the request.</i>	
Name and address: <i>(Family name followed by given name; for a legal entity, full official designation. The address must include postal code and name of country. The country of the address indicated in this Box is the applicant's State (that is, country) of residence if no State of residence is indicated below.)</i> O'BRIEN, Maurice 28 Meadowbrook Riverstown Glanmire Co. Cork IRELAND	This person is: <input type="checkbox"/> applicant only <input checked="" type="checkbox"/> applicant and inventor <input type="checkbox"/> inventor only <i>(If this check-box is marked, do not fill in below.)</i> <hr/> Applicant's registration No. with the Office
State <i>(that is, country)</i> of nationality: IRELAND	State <i>(that is, country)</i> of residence: IRELAND
This person is applicant for the purposes of: <input type="checkbox"/> all designated States <input type="checkbox"/> all designated States except the United States of America <input checked="" type="checkbox"/> the United States of America only <input type="checkbox"/> the States indicated in the Supplemental Box	
Name and address: <i>(Family name followed by given name; for a legal entity, full official designation. The address must include postal code and name of country. The country of the address indicated in this Box is the applicant's State (that is, country) of residence if no State of residence is indicated below.)</i> LAN, Poting 5F-3, No. 15 Lane 420, Section 5 Cheng-Kung Road Taipei TAIWAN	This person is: <input type="checkbox"/> applicant only <input checked="" type="checkbox"/> applicant and inventor <input type="checkbox"/> inventor only <i>(If this check-box is marked, do not fill in below.)</i> <hr/> Applicant's registration No. with the Office
State <i>(that is, country)</i> of nationality: TAIWAN	State <i>(that is, country)</i> of residence: TAIWAN
This person is applicant for the purposes of: <input type="checkbox"/> all designated States <input type="checkbox"/> all designated States except the United States of America <input checked="" type="checkbox"/> the United States of America only <input type="checkbox"/> the States indicated in the Supplemental Box	
Name and address: <i>(Family name followed by given name; for a legal entity, full official designation. The address must include postal code and name of country. The country of the address indicated in this Box is the applicant's State (that is, country) of residence if no State of residence is indicated below.)</i> CHU, Stelar No. 221, Llong-Nan Road Ping-Cheng City Tao-Yuan County TAIWAN	This person is: <input type="checkbox"/> applicant only <input checked="" type="checkbox"/> applicant and inventor <input type="checkbox"/> inventor only <i>(If this check-box is marked, do not fill in below.)</i> <hr/> Applicant's registration No. with the Office
State <i>(that is, country)</i> of nationality: TAIWAN	State <i>(that is, country)</i> of residence: TAIWAN
This person is applicant for the purposes of: <input type="checkbox"/> all designated States <input type="checkbox"/> all designated States except the United States of America <input checked="" type="checkbox"/> the United States of America only <input type="checkbox"/> the States indicated in the Supplemental Box	
Name and address: <i>(Family name followed by given name; for a legal entity, full official designation. The address must include postal code and name of country. The country of the address indicated in this Box is the applicant's State (that is, country) of residence if no State of residence is indicated below.)</i> BURKE, Ray Tullig Whitechurch Co. Cork IRELAND	This person is: <input type="checkbox"/> applicant only <input checked="" type="checkbox"/> applicant and inventor <input type="checkbox"/> inventor only <i>(If this check-box is marked, do not fill in below.)</i> <hr/> Applicant's registration No. with the Office
State <i>(that is, country)</i> of nationality: IRELAND	State <i>(that is, country)</i> of residence: IRELAND
This person is applicant for the purposes of: <input type="checkbox"/> all designated States <input type="checkbox"/> all designated States except the United States of America <input checked="" type="checkbox"/> the United States of America only <input type="checkbox"/> the States indicated in the Supplemental Box	
<input type="checkbox"/> Further applicants and/or (further) inventors are indicated on another continuation sheet.	

Box No.V DESIGNATION OF STATES

Mark the applicable check-boxes below. At least one must be marked.

The following designations are hereby made under Rule 4.9(a):

Regional Patent

- ☒ **AP** **ARIPO Patent:** GH Ghana, GM Gambia, KE Kenya, LS Lesotho, MW Malawi, MZ Mozambique, SD Sudan, SL Sierra Leone, SZ Swaziland, TZ United Republic of Tanzania, UG Uganda, ZM Zambia, ZW Zimbabwe, and any other State which is a Contracting State of the Harare Protocol and of the PCT (if other kind of protection or treatment desired, specify on dotted line)
- ☒ **EA** **Eurasian Patent:** AM Armenia, AZ Azerbaijan, BY Belarus, KG Kyrgyzstan, KZ Kazakhstan, MD Republic of Moldova, RU Russian Federation, TJ Tajikistan, TM Turkmenistan, and any other State which is a Contracting State of
- ☒ **EP** **European Patent:** AT Austria, BE Belgium, BG Bulgaria, CH & LI Switzerland and Liechtenstein, CY Cyprus, CZ Czech Republic, DE Germany, DK Denmark, EE Estonia, ES Spain, FI Finland, FR France, GB United Kingdom, GR Greece, IE Ireland, IT Italy, LU Luxembourg, MC Monaco, NL Netherlands, PT Portugal, SE Sweden, SI Slovenia, SK Slovakia, TR Turkey, and any other State which is a Contracting State of the European Patent Convention and of the PCT
- ☒ **OA** **OAPI Patent:** BF Burkina Faso, BJ Benin, CF Central African Republic, CG Congo, CI Côte d'Ivoire, CM Cameroon, GA Gabon, GN Guinea, GQ Equatorial Guinea, GW Guinea-Bissau, ML Mali, MR Mauritania, NE Niger, SN Senegal, TD Chad, TG Togo, and any other State which is a member State of OAPI and a Contracting State of the PCT (if other kind of protection or treatment desired, specify on dotted line)

National Patent (if other kind of protection or treatment desired, specify on dotted line):

- | | | |
|--|---|--|
| <input checked="" type="checkbox"/> AE United Arab Emirates | <input checked="" type="checkbox"/> GM Gambia | <input checked="" type="checkbox"/> NZ New Zealand |
| <input checked="" type="checkbox"/> AG Antigua and Barbuda | <input checked="" type="checkbox"/> HR Croatia | <input checked="" type="checkbox"/> OM Oman |
| <input checked="" type="checkbox"/> AL Albania | <input checked="" type="checkbox"/> HU Hungary | <input checked="" type="checkbox"/> PH Philippines |
| <input checked="" type="checkbox"/> AM Armenia | <input checked="" type="checkbox"/> ID Indonesia | <input checked="" type="checkbox"/> PL Poland |
| <input checked="" type="checkbox"/> AT Austria | <input checked="" type="checkbox"/> IL Israel | <input checked="" type="checkbox"/> PT Portugal |
| <input checked="" type="checkbox"/> AU Australia | <input checked="" type="checkbox"/> IN India | <input checked="" type="checkbox"/> RO Romania |
| <input checked="" type="checkbox"/> AZ Azerbaijan | <input checked="" type="checkbox"/> IS Iceland | <input checked="" type="checkbox"/> RU Russian Federation |
| <input checked="" type="checkbox"/> BA Bosnia and Herzegovina | <input checked="" type="checkbox"/> JP Japan | <input checked="" type="checkbox"/> SC Seychelles |
| <input checked="" type="checkbox"/> BB Barbados | <input checked="" type="checkbox"/> KE Kenya | <input checked="" type="checkbox"/> SD Sudan |
| <input checked="" type="checkbox"/> BG Bulgaria | <input checked="" type="checkbox"/> KG Kyrgyzstan | <input checked="" type="checkbox"/> SE Sweden |
| <input checked="" type="checkbox"/> BR Brazil | <input checked="" type="checkbox"/> KP Democratic People's Republic of Korea | <input checked="" type="checkbox"/> SG Singapore |
| <input checked="" type="checkbox"/> BY Belarus | <input checked="" type="checkbox"/> KR Republic of Korea | <input checked="" type="checkbox"/> SK Slovakia |
| <input checked="" type="checkbox"/> BZ Belize | <input checked="" type="checkbox"/> KZ Kazakhstan | <input checked="" type="checkbox"/> SL Sierra Leone |
| <input checked="" type="checkbox"/> CA Canada | <input checked="" type="checkbox"/> LC Saint Lucia | <input checked="" type="checkbox"/> TJ Tajikistan |
| <input checked="" type="checkbox"/> CH & LI Switzerland and Liechtenstein | <input checked="" type="checkbox"/> LK Sri Lanka | <input checked="" type="checkbox"/> TM Turkmenistan |
| <input checked="" type="checkbox"/> CN China | <input checked="" type="checkbox"/> LR Liberia | <input checked="" type="checkbox"/> TN Tunisia |
| <input checked="" type="checkbox"/> CO Colombia | <input checked="" type="checkbox"/> LS Lesotho | <input checked="" type="checkbox"/> TR Turkey |
| <input checked="" type="checkbox"/> CR Costa Rica | <input checked="" type="checkbox"/> LT Lithuania | <input checked="" type="checkbox"/> TT Trinidad and Tobago |
| <input checked="" type="checkbox"/> CU Cuba | <input checked="" type="checkbox"/> LU Luxembourg | <input checked="" type="checkbox"/> TZ United Republic of Tanzania |
| <input checked="" type="checkbox"/> CZ Czech Republic | <input checked="" type="checkbox"/> LV Latvia | <input checked="" type="checkbox"/> UA Ukraine |
| <input checked="" type="checkbox"/> DE Germany | <input checked="" type="checkbox"/> MA Morocco | <input checked="" type="checkbox"/> UG Uganda |
| <input checked="" type="checkbox"/> DK Denmark | <input checked="" type="checkbox"/> MD Republic of Moldova | <input checked="" type="checkbox"/> US United States of America |
| <input checked="" type="checkbox"/> DM Dominica | <input checked="" type="checkbox"/> MG Madagascar | <input checked="" type="checkbox"/> UZ Uzbekistan |
| <input checked="" type="checkbox"/> DZ Algeria | <input checked="" type="checkbox"/> MK The former Yugoslav Republic of Macedonia | <input checked="" type="checkbox"/> VC Saint Vincent and the Grenadines |
| <input checked="" type="checkbox"/> EC Ecuador | <input checked="" type="checkbox"/> MN Mongolia | <input checked="" type="checkbox"/> VN Viet Nam |
| <input checked="" type="checkbox"/> EE Estonia | <input checked="" type="checkbox"/> MW Malawi | <input checked="" type="checkbox"/> YU Yugoslavia |
| <input checked="" type="checkbox"/> ES Spain | <input checked="" type="checkbox"/> MX Mexico | <input checked="" type="checkbox"/> ZA South Africa |
| <input checked="" type="checkbox"/> FI Finland | <input checked="" type="checkbox"/> MZ Mozambique | <input checked="" type="checkbox"/> ZM Zambia |
| <input checked="" type="checkbox"/> GB United Kingdom | <input checked="" type="checkbox"/> NO Norway | <input checked="" type="checkbox"/> ZW Zimbabwe |
| <input checked="" type="checkbox"/> GD Grenada | | |
| <input checked="" type="checkbox"/> GE Georgia | | |
| <input checked="" type="checkbox"/> GH Ghana | | |

Check-boxes below reserved for designating States which have become party to the PCT after issuance of this sheet:

- | | | |
|---|--------------------------------|--------------------------------|
| <input checked="" type="checkbox"/> NI | <input type="checkbox"/> | <input type="checkbox"/> |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

Precautionary Designation Statement: In addition to the designations made above, the applicant also makes under Rule 4.9(b) all other designations which would be permitted under the PCT except any designation(s) indicated in the Supplemental Box as being excluded from the scope of this statement. The applicant declares that those additional designations are subject to confirmation and that any designation which is not confirmed before the expiration of 15 months from the priority date is to be regarded as withdrawn by the applicant at the expiration of that time limit. (Confirmation (including fees) must reach the receiving Office within the 15-month time limit.)

Box No. VI PRIORITY CLAIM

The priority of the following earlier application(s) is hereby claimed:

Filing date of earlier application (day/month/year)	Number of earlier application	Where earlier application is:		
		national application: country or Member of WTO	regional application:* regional Office	international application: receiving Office
item (1) 11-12-2002	60/432,493	US		
item (2)				
item (3)				
item (4)				
item (5)				

☐ Further priority claims are indicated in the Supplemental Box.

The receiving Office is requested to prepare and transmit to the International Bureau a certified copy of the earlier application(s) (only if the earlier application was filed with the Office which for the purposes of this international application is the receiving Office) identified above as:

☒ all items ☐ item (1) ☐ item (2) ☐ item (3) ☐ item (4) ☐ item (5) ☐ other, see Supplemental Box

* Where the earlier application is an ARIPO application, indicate at least one country party to the Paris Convention for the Protection of Industrial Property or one Member of the World Trade Organization for which that earlier application was filed (Rule 4.10(b)(ii)):

Box No. VII INTERNATIONAL SEARCHING AUTHORITY

Choice of International Searching Authority (ISA) (if two or more International Searching Authorities are competent to carry out the international search, indicate the Authority chosen; the two-letter code may be used):

ISA/ EP.....

Request to use results of earlier search; reference to that search (if an earlier search has been carried out by or requested from the International Searching Authority):

Date (day/month/year) Number Country (or regional Office)

Box No. VIII DECLARATIONS

The following declarations are contained in Boxes Nos. VIII (i) to (v) (mark the applicable check-boxes below and indicate in the right column the number of each type of declaration):

Number of
declarations

- | | | | |
|---|--|---|---|
| <input type="checkbox"/> Box No. VIII (i) | Declaration as to the identity of the inventor | : | |
| <input type="checkbox"/> Box No. VIII (ii) | Declaration as to the applicant's entitlement, as at the international filing date, to apply for and be granted a patent | : | |
| <input type="checkbox"/> Box No. VIII (iii) | Declaration as to the applicant's entitlement, as at the international filing date, to claim the priority of the earlier application | : | |
| <input checked="" type="checkbox"/> Box No. VIII (iv) | Declaration of inventorship (only for the purposes of the designation of the United States of America) | : | 4 |
| <input type="checkbox"/> Box No. VIII (v) | Declaration as to non-prejudicial disclosures or exceptions to lack of novelty | : | |

Box No. VIII (iv) DECLARATION: INVENTORSHIP (only for the purposes of the designation of the United States of America)

The declaration must conform to the following standardized wording provided for in Section 214; see Notes to Boxes Nos. VIII (i) to (v) (in general and the specific Notes to Box No. VIII (iv)). If this Box is not used, this sheet should not be included in the request.

**Declaration of inventorship (Rules 4.17(iv) and 51bis.1(a)(iv))
for the purposes of the designation of the United States of America:**

I hereby declare that I believe I am the original, first and sole (if only one inventor is listed below) or joint (if more than one inventor is listed below) inventor of the subject matter which is claimed and for which a patent is sought.

This declaration is directed to the international application of which it forms a part (if filing declaration with application).

This declaration is directed to international application No. PCT/ EP. (if furnishing declaration pursuant to Rule 26ter).

I hereby declare that my residence, mailing address, and citizenship are as stated next to my name.

I hereby state that I have reviewed and understand the contents of the above-identified international application, including the claims of said application. I have identified in the request of said application, in compliance with PCT Rule 4.10, any claim to foreign priority, and I have identified below, under the heading "Prior Applications," by application number, country or Member of the World Trade Organization, day, month and year of filing, any application for a patent or inventor's certificate filed in a country other than the United States of America, including any PCT international application designating at least one country other than the United States of America, having a filing date before that of the application on which foreign priority is claimed.

Prior Applications:
.

I hereby acknowledge the duty to disclose information that is known by me to be material to patentability as defined by 37 C.F.R. §1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the PCT international filing date of the continuation-in-part application.

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Name: BURKE, Ray

Residence: IRELAND
(city and either US state, if applicable, or country)

Mailing Address: Tullig Whitechurch
Co. Cork IRELAND

Citizenship: Irish

Inventor's Signature:
(if not contained in the request, or if declaration is corrected or added under Rule 26ter after the filing of the international application. The signature must be that of the inventor, not that of the agent)

Date:
(of signature which is not contained in the request, or of the declaration that is corrected or added under Rule 26ter after the filing of the international application)

Name: O'BRIEN, Maurice

Residence: IRELAND
(city and either US state, if applicable, or country)

Mailing Address: 28 Meadowbrook
Riverstown, Glanmire IRELAND

Citizenship: Irish

Inventor's Signature:
(if not contained in the request, or if declaration is corrected or added under Rule 26ter after the filing of the international application. The signature must be that of the inventor, not that of the agent)

Date:
(of signature which is not contained in the request, or of the declaration that is corrected or added under Rule 26ter after the filing of the international application)

☒ This declaration is continued on the following sheet, "Continuation of Box No. VIII (iv)".

Continuation of Box No. VIII (v) **DECLARATION**

If the space is insufficient in any of Boxes Nos. VIII (i) to (v) to furnish all the information, including in the case where more than two inventors are to be named in Box No. VIII (iv), in such case, write "Continuation of Box No. VIII ..." (indicate the item number of the Box) and furnish the information in the same manner as required for the purposes of the Box in which the space was insufficient. If additional space is needed in respect of two or more declarations, a separate continuation box must be used for each such declaration. If this Box is not used, this sheet should not be included in the request.

CONTINUATION of Box No. VIII (IV)

LAN, Poting
5F-3, No. 15
Lane 420, Section 5
Cheng-Kung Road
Taipei
TAIWAN

Citizenship: Taiwanese

Inventor's Signature

Date

CHU, Stelar
No. 221, Long-Nan Road
Ping-Cheng City
Tao-Yuan County
TAIWAN

Citizenship: Taiwanese

Inventor's Signature

Date

Box No. IX CHECK LIST; LANGUAGE OF FILING

This international application contains:		This international application is accompanied by the following item(s) (mark the applicable check-boxes below and indicate in right column the number of each item):	Number of items
(a) in paper form, the following number of sheets:		1. <input checked="" type="checkbox"/> fee calculation sheet	:
request (including declaration sheets)	: 8	2. <input type="checkbox"/> original separate power of attorney	:
description (excluding sequence listings and/or tables related thereto)	: 21	3. <input type="checkbox"/> original general power of attorney	:
claims	: 10	4. <input checked="" type="checkbox"/> copy of general power of attorney; reference number, if any:	:
abstract	: 1	5. <input type="checkbox"/> statement explaining lack of signature	:
drawings	: 6	6. <input type="checkbox"/> priority document(s) identified in Box No. VI as item(s):	:
Sub-total number of sheets	: 46	7. <input type="checkbox"/> translation of international application into (language):	:
sequence listings	:	8. <input type="checkbox"/> separate indications concerning deposited microorganism or other biological material	:
tables related thereto	:	9. <input type="checkbox"/> sequence listings in computer readable form (indicate type and number of carriers)	:
(for both, actual number of sheets if filed in paper form, whether or not also filed in computer readable form; see (c) below)		(i) <input type="checkbox"/> copy submitted for the purposes of international search under Rule 13ter only (and not as part of the international application)	:
Total number of sheets	: 46	(ii) <input type="checkbox"/> (only where check-box (b)(i) or (c)(i) is marked in left column) additional copies including, where applicable, the copy for the purposes of international search under Rule 13ter	:
(b) <input type="checkbox"/> only in computer readable form (Section 801(a)(i))		(iii) <input type="checkbox"/> together with relevant statement as to the identity of the copy or copies with the sequence listings mentioned in left column	:
(i) <input type="checkbox"/> sequence listings		10. <input type="checkbox"/> tables in computer readable form related to sequence listings (indicate type and number of carriers)	:
(ii) <input type="checkbox"/> tables related thereto		(i) <input type="checkbox"/> copy submitted for the purposes of international search under Section 802(b-quater) only (and not as part of the international application)	:
(c) <input type="checkbox"/> also in computer readable form (Section 801(a)(ii))		(ii) <input type="checkbox"/> (only where check-box (b)(ii) or (c)(ii) is marked in left column) additional copies including, where applicable, the copy for the purposes of international search under Section 802(b-quater)	:
(i) <input type="checkbox"/> sequence listings		(iii) <input type="checkbox"/> together with relevant statement as to the identity of the copy or copies with the tables mentioned in left column	:
(ii) <input type="checkbox"/> tables related thereto		11. <input type="checkbox"/> other (specify):	:
Type and number of carriers (diskette, CD-ROM, CD-R or other) on which are contained the			
<input type="checkbox"/> sequence listings:			
<input type="checkbox"/> tables related thereto:			
(additional copies to be indicated under items 9(ii) and/or 10(ii), in right column)			
Figure of the drawings which should accompany the abstract: 9		Language of filing of the international application: English	

Box No. X SIGNATURE OF APPLICANT, AGENT OR COMMON REPRESENTATIVE

Next to each signature, indicate the name of the person signing and the capacity in which the person signs (if such capacity is not obvious from reading the request).

Howard J. Klein, Reg. No. 28,727

For receiving Office use only		2. Drawings: <input type="checkbox"/> received: <input type="checkbox"/> not received:
1. Date of actual receipt of the purported international application:		
3. Corrected date of actual receipt due to later but timely received papers or drawings completing the purported international application:		
4. Date of timely receipt of the required corrections under PCT Article 11(2):		
5. International Searching Authority (if two or more are competent): ISA/	6. <input type="checkbox"/> Transmittal of search copy delayed until search fee is paid	

Date of receipt of the record copy by the International Bureau:

For International Bureau use only